Approved for use through 7/31/2006. OMB 0651-0032 U.S. Palent and Trademark Off

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Substitute for Form PTO-875													Application or Docket Number				
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TO	CFR 1.16(0), (p),	or (q))			712			┚	L					-	$\neg$	<del>/-</del>	ᅱ
	7 CFR 1.16(I)) IDEPENDENT CLAIMS		minus 20		39	7.		7	x	=	1	$\neg$			$\dashv$	-/	4
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FEE (37 CFR 1,16(s))			is \$250 (\$125 for small culiby for a sale								l	-		/	7		٦
			additional 50 sheets or fraction thereof. So 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).									1					
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MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(1))  If the difference in column 1 is less than zero, enter "o" in column 2.  TOTAL											·	ſ	7	7		1	
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APPLICATION AS AMENDED - PART II											<b></b>		TOTAL	L	190	4	
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F	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.160)									+			-				
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* If the color in columns is a second of the color in col											OR	TO	TAL				
11	If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".  The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".												الله	O'L FEE			. •• •
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The "Highest Number Previously Paid For" (IN THIS SPACE is less than 3, enter "3".

The "Highest Number Proviously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1: "

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to fite (and by the underlying gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the Individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.